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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if the ch

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself	Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on	Kathryn					
	your government-issued picture identification (for	First name	First name				
	example, your driver's	Alyssa					
	license or passport).	Middle name		Middle name			
	Bring your picture identification to your	Davis					
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.	Katie Davis					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3849					

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	284 Nicole Dr Unit F South Elgin, IL 60177	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Kane	Owntr
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Kathryn Alyssa Davis

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Der	otor 1 Kathryn Alyssa Da	avis				Case number (if known)	
Par	t 2: Tell the Court About	Your Bankrı	uptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chapte	r 7				
		☐ Chapte	r 11				
		☐ Chapte	r 12				
		☐ Chapte	r 13				
8.	How you will pay the fee	Chapter 7 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local of about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashi order. If your attorney is submitting your payment on your behalf, your attorney may pay with a cred a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. It but is not required to, waive your fee, and may do so only if your income is less than 150% of the othat applies to your family size and you are unable to pay the fee in installments). If you choose this out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your hose the othat applies to your family size and you are unable to pay the fee in installments). If you choose this out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your hose this out the Application to Have the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose this out the Application to Have the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose this out the Application to Have the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and file it with your hose the Chapter 3 Filing Fee Waived (Official Form 103B) and				e yourself, you may pay with cash, cashier's check, or mo behalf, your attorney may pay with a credit card or check w	ney vith
		☐ I nee	ed to pa Filing Fe	y the fee in installments. If see in Installments (Official Fo	you choose this or	option, sign and attach the Application for Individuals to Pa	ay
		☐ I req but is that a	uest that s not recapplies t	at my fee be waived (You m quired to, waive your fee, and to your family size and you a	nay request this op I may do so only if re unable to pay th	f your income is less than 150% of the official poverty line he fee in installments). If you choose this option, you mus	•
		out ti	he <i>Appli</i>	cation to Have the Chapter 7	' Filing Fee Waive	ed (Official Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
		☐ Yes.					
			District				
			District				
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor				
			District		When	Case number, if known	
11.		□ No.	Go to	line 12.			
	residence?	Yes.	Has yo	our landlord obtained an evic	tion judgment agai	ainst you and do you want to stay in your residence?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial Stateme</i> , bankruptcy petition.	nt About an Evictio	ion Judgment Against You (Form 101A) and file it with this	i

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Deb	otor 1 Kathryn Alyssa D	avis		Case number (if known)		
	_					
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name and location of bu	siness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	,		
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.		Number, Street, City, Sta	ate & ZIP Code ox to describe your business:		
	it to this petition.			ness (as defined in 11 U.S.C. § 101(27A))		
			_	Il Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	re		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			
	For a definition of small	■ No.	I am not filing under Cha	pter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	r Have An	y Hazardous Property or Ar	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.	· · · · · · · · · · · · · · · · · · ·			
	property that poses or is alleged to pose a threat	_				
	of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code		
				inumber, street, bity, state a zip bout		

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Document Page 5 of 38 Debtor 1 Kathryn Alyssa Davis Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: 15. Tell the court whether You must check one: you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about credit counseling before plan, if any, that you developed with the agency. any, that you developed with the agency. you file for bankruptcy. You must truthfully check I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed one of the following filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a choices. If you cannot do so, you are not eligible to a certificate of completion. certificate of completion. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling □ I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: I have a mental illness or a Incapacity. I have a mental illness or a mental Incapacity. mental deficiency that makes deficiency that makes me incapable me incapable of realizing or of realizing or making rational making rational decisions decisions about finances. about finances. Disability. My physical disability causes Disability. My physical disability causes me to П me to be unable to participate be unable to participate in a briefing in a briefing in person, by in person, by phone, or through the phone, or through the internet, even after I reasonably tried internet, even after I to do so. reasonably tried to do so. Active duty. I am currently on active Active duty. I am currently on active military duty military duty in a military in a military combat zone. combat zone. If you believe you are not required to receive a If you believe you are not required to receive a briefing briefing about credit counseling, you must file a about credit counseling, you must file a motion for waiver

motion for waiver of credit counseling with the

court.

of credit counseling with the court.

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Deb	otor 1 Kathryn Alyssa Da	avis		Case number (if known)			
Par	t 6: Answer These Questi	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.			ed in 11 U.S.C. § 101(8) as "incurred by ar		
			☐ No. Go to line 16b.				
			■ Yes. Go to line 17.				
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	that are not consumer debts or busines:	s debts		
17.	Are you filing under Chapter 7?	tions for Reporting Purposes 16a.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	expenses are paid that funds will				
	administrative expenses are paid that funds will		□ No				
	be available for distribution to unsecured creditors?		■ Yes				
18.	How many Creditors do	■ 1-49		1 ,000-5,000	2 5,001-50,000		
	you estimate that you owe?						
				□ 10,001-25,000	☐ More than100,000		
19.	How much do you	\$0 - \$	550,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000		☐ \$1,000,000,001 - \$10 billion		
		ப \$500,	001 - \$1 million	— \$100,000,001 \$000 Hillion			
20.	How much do you	\$0 - \$	550,000				
	estimate your liabilities to be?				☐ \$1,000,000,001 - \$10 billion		
					<u> </u>		
		— ψ5000,			·		
Par	17: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		I request	relief in accordance with the chap	eter of title 11, United States Code, spec	cified in this petition.		
bankruptcy cas			cy case can result in fines up to \$2 d 3571.				
		Kathryr	n Alyssa Davis	Signature of Debtor	2		
		Executed	d on January 29, 2016	Executed on			
			MM / DD / YYYY	MM /	DD / YYYY		

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Debtor 1 Kathryn Alyssa D	avis	Case	e number (if known)
For your attorney, if you are represented by one		d States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. §
If you are not represented by an attorney, you do not need to file this page.		pplies, certify that I have n	o knowledge after an inquiry that the information
	/s/ Edgar P. Petti	Date	January 29, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Edgar P. Petti Printed name		
	Petti Murphy & Associates Firm name		
	22 South 4th Street Suite 2		
	Geneva, IL 60134 Number, Street, City, State & ZIP Code		
	Contact phone 630-232-9303	Email address	epetti@pettimurphylaw.com
	2192764		
	Bar number & State		

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Fill	I in this information to identify your case:			
Deb	btor 1 Kathryn Alyssa Davis			
Deh	First Name Middle Name Last Name			
	ouse if, filing) First Name Middle Name Last Name	_		
Unit	ited States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	_		
	se numbernown)		_	if this is an ed filing
	fficial Form 106Sum Immary of Your Assets and Liabilities and Certain Statistical Infor	rmation	1	2/15
Be a	as complete and accurate as possible. If two married people are filing together, both are equally romation. Fill out all of your schedules first; then complete the information on this form. If you are ir original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	esponsible fo	r supplyir	g correct
Part	rt 1: Summarize Your Assets			
			Your as	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	8,077.50
	1c. Copy line 63, Total of all property on Schedule A/B		\$	8,077.50
Part	rt 2: Summarize Your Liabilities			
			Your lia	
			Amount	you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of S	Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	25,312.55
	Your to	tal liabilities	\$	25,312.55
Part	rt 3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	2,016.44
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	1,987.00
Part	rt 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the	e court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 15		personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the for the court with your other schedules.	rm. <i>Check thi</i> s	<i>box</i> and s	ubmit this form to

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Debte	or 1 Kathryn Alyssa Davis	Case number (if known)	
	From the Statement of Your Current Monthly Income: Copy yo 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 1		\$2,445.90

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Boodmone 1 ago 10 of 00		
Fill in this info	rmation to identify your case a	and this filing:		
Debtor 1	Kathryn Alyssa Davis			
	First Name	Middle Name Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		
United States B	Sankruntov Court for the NOR	THERN DISTRICT OF ILLINOIS		
Officed States D	Marikrupicy Court for the. NON	THERN DISTRICT OF ILLINOIS		
Case number				☐ Check if this is an
				amended filing
~ <i></i> =	4004/5			
	orm 106A/B			
Schedu	le A/B: Property	У		12/15
it fits best. Be as more space is nee	complete and accurate as possible eded, attach a separate sheet to thi	List an asset only once. If an asset fits in more than or b. If two married people are filing together, both are equ s form. On the top of any additional pages, write your n or Other Real Estate You Own or Have an Interest In	ally responsible for sup	plying correct information. If
1. Do you own or	have any legal or equitable interes	et in any residence, building, land, or similar property?		
■ No. Go to Pa	art 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	e Your Vehicles			
3. Cars, vans, t □ No ■ Yes	crucks, tractors, sport utility ve	ehicles, motorcycles		
3.1 Make:	Toyota	Who has an interest in the property? Check one		red claims or exemptions. Put secured claims on Schedule D:
Model:	Tundra	Debtor 1 only		re Claims Secured by Property.
Year:	2006	Debtor 2 only	Current value of the	
Approxima Other info	ate mileage: 128,000 rmation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
Locatio	n: 284 Nicole Dr Unit F, Elgin IL 60177	Check if this is community property (see instructions)	\$5,000	.00 \$5,000.00
Examples: Bo No Yes Add the doll pages you h Part 3: Describe	lar value of the portion you over attached for Part 2. Write	ond other recreational vehicles, other vehicles, a attercraft, fishing vessels, snowmobiles, motorcycle over for all of your entries from Part 2, including a that number here	accessories	\$5,000.00 Current value of the portion you own? Do not deduct secured
6 Household o	goods and furnishings			claims or exemptions.
6. Household g	goods and furnishings			

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

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De	ebtor 1	Kathryn Aly	ssa Davis	Case	e number (if known)	
	■ Yes.	Describe				
			Misc. household goods and for Location: 284 Nicole Dr Unit F		home	\$750.00
	□No	les: Televisions	and radios; audio, video, stereo, and d Il phones, cameras, media players, gar		s, scanners; music	collections; electronic devices
			TV and Computer Location: 284 Nicole Dr Unit F	F, South Elgin IL 60177		\$150.00
	Example No		d figurines; paintings, prints, or other a tions, memorabilia, collectibles	rtwork; books, pictures, or other art o	objects; stamp, coir	n, or baseball card collections;
	Example No	les: Sports, photomusical inst	ographic, exercise, and other hobby ed	quipment; bicycles, pool tables, golf	clubs, skis; canoes	and kayaks; carpentry tools;
	■ No		es, shotguns, ammunition, and related	equipment		
11.	□ No ·		clothes, furs, leather coats, designer we	ear, shoes, accessories		
			Necessary clothing of adult fe Location: 284 Nicole Dr Unit F			\$400.00
13.	■ No □ Yes. Non-fa Examp		ewelry, costume jewelry, engagement i	rings, wedding rings, heirloom jewelr	y, watches, gems,	gold, silver
	□ No ■ Yes.	Describe				
			Animals: Cat			\$20.00
	■ No	ther personal a	nd household items you did not alre	ady list, including any health aids	you did not list	
15			e of all of your entries from Part 3, in t number here		have attached	\$1,320.00

Part 4: Describe Your Financial Assets

Official Form 106A/B

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De	ebtor 1	Kathryn A	lyssa Dav	is		Case number (if k	nown)
Do	you ov	vn or have an	y legal or e	quitable interest ir	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	,,	·		ome, in a safe deposit b	ox, and on hand when you file you	ır petition
17.					counts; certificates of deps with the same institution	posit; shares in credit unions, brok on, list each.	erage houses, and other similar
	_				Institution name:		
	— 165			Checking	Account #402 US Bank, 855 60123	4 South Randall Road, Elgin,	IL \$25.00
18.	Examµ □ No -			cly traded stocks ent accounts with br Institution or issuer	rokerage firms, money m	narket accounts	
				Stock: Pentair 1	7 Shares		\$332.50
20.	and jo ■ No □ Yes. Govern Negoti Non-n ■ No □ Yes. Retirer Examp	Give specific ment and co iable instrumer egotiable instru Give specific i	information Nai rporate bo nts include puments are nformation Issi on accoun in IRA, ERI bunt separa	about them	otiable and non-negotishiers' checks, promisson ansfer to someone by signal 403(b), thrift savings according the light savings according to the light savin	ory notes, and money orders. gning or delivering them. counts, or other pension or profit-s	
					Ketirement. A	menprise rinanciai	
	Your s Examp ■ No		sed deposi	ts you have made s		service or use from a company gas, water), telecommunications or individual:	companies, or others
23.	_	ies (A contrac	t for a perio	dic payment of mon	ney to you, either for life	or for a number of years)	
	■ No □ Yes		Issuer nam	e and description.			
24.		ts in an educa C. §§ 530(b)(1			qualified ABLE progran	n, or under a qualified state tuit	ion program.
	■ No □ Yes		Institution r	name and descriptio	on. Separately file the red	cords of any interests.11 U.S.C. §	521(c):

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Debtor 1	Kathryn Alyssa	Davis			ase number (if known)		
25. Trust : ■ No	s, equitable or future	interests in propert	y (other than anything lis	ted in line 1), and	I rights or powers ex	cercisable for yo	ur benefit
	s. Give specific inform	ation about them					
Exan ■ No		names, websites, pro	s, and other intellectual poceeds from royalties and li		nts		
27. Licen	ses, franchises, and	other general intang	gibles cooperative association hol	dings, liquor licens	ses, professional licen	nses	
☐ Yes	s. Give specific inform	ation about them					
Money or	r property owed to yo	ou?					
	efunds owed to you						
□ No ■ Yes	Give specific informa	ation about them, inclu	uding whether you already	filed the returns ar	nd the tax vears		
_ 100	. Cive specific informe	ation about thom, more	during which for you direday	med the retains di	id the tax years		
]		
		Est. 20	015 Tax Refund		Federal		\$1,300.00
					1		
		Est 20	15 Tax Refund		State		\$100.00
					1		
<i>Exan</i> ■ No	y support nples: Past due or lum s. Give specific informa		eal support, child support, r	naintenance, divor	ce settlement, proper	ty settlement	
			nyments, disability benefits, omeone else	, sick pay, vacatior	n pay, workers' comp	ensation, Social S	Security
☐ Yes	s. Give specific inform	ation					
	ests in insurance polinples: Health, disability		alth savings account (HSA); credit, homeowr	ner's, or renter's insura	ance	
■ Yes	s. Name the insurance	company of each pol Company name:	icy and list its value.	Beneficiar	y:	Surrender value:	r or refund
		death benefit of State Farm, PO E	3ox 2364,	Davis, M and Scot			\$0.00
	nterest in property th	death benefit of State Farm, PO E Bloomington, IL	\$50,000 Box 2364,	Davis, M	atthew Davis tt Davis,		

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

 \square Yes. Give specific information..

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Del	btor 1	Kathryn Alyssa Davis		Case number (if known)	
_		s against third parties, whether or not you have filed a law bles: Accidents, employment disputes, insurance claims, or r		and for payment	
		Describe each claim			
ı	No	contingent and unliquidated claims of every nature, inclu	ıding counterclaims	of the debtor and rights t	to set off claims
[☐ Yes.	Describe each claim			
_	_	nancial assets you did not already list			
_	■ No □ Yes.	Give specific information			
36.		the dollar value of all of your entries from Part 4, includin art 4. Write that number here		ges you have attached	\$1,757.50
Par	t 5: De	scribe Any Business-Related Property You Own or Have an Intere	st In. List any real estate	e in Part 1.	
	_ *	own or have any legal or equitable interest in any business-related	property?		
_	_	o to Part 6.			
	Yes. G	Go to line 38.			
Par		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
46.	Do you	u own or have any legal or equitable interest in any farm-	or commercial fishing	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes	Go to line 47.			
Par	t 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.		u have other property of any kind you did not already list obles: Season tickets, country club membership	?		
	No No	Observation of the design of the			
L	⊔ Yes.	Give specific information			
54.	Add t	the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Par	t 8:	List the Totals of Each Part of this Form			
					**
55.		1: Total real estate, line 2 2: Total vehicles, line 5			\$0.00
56. 57.		3: Total personal and household items, line 15	\$5,000.00 \$1,320.00		
58.		4: Total financial assets, line 36	\$1,757.50		
59.		5: Total business-related property, line 45	\$0.00		
60.		6: Total farm- and fishing-related property, line 52	\$0.00		
61.		7: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$8,077.50	Copy personal property t	total \$8,077.50
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$8,077.50

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kathryn Alyssa D	avis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	•	• •		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2006 Toyota Tundra 128,000 miles Location: 284 Nicole Dr Unit F, South	\$5,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Elgin IL 60177 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2006 Toyota Tundra 128,000 miles Location: 284 Nicole Dr Unit F, South	\$5,000.00		\$2,600.00	735 ILCS 5/12-1001(b)
Elgin IL 60177 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. household goods and furnishings of 2 bedroom townhome	\$750.00		\$750.00	735 ILCS 5/12-1001(b)
Location: 284 Nicole Dr Unit F, South Elgin IL 60177 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TV and Computer Location: 284 Nicole Dr Unit F, South	\$150.00		\$150.00	735 ILCS 5/12-1001(b)
Elgin IL 60177 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Necessary clothing of adult female Location: 284 Nicole Dr Unit F, South	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
Elgin IL 60177 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

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btor 1	Kathryn Alyssa Davis	Case number (if known)					
	f description of the property and line on edule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	mals: Cat from Schedule A/B: 13.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)		
	Tom Conceand / V.D. 1991			100% of fair market value, up to any applicable statutory limit			
	ecking: Account #4024 Bank, 855 South Randall Road,	\$25.00		\$25.00	735 ILCS 5/12-1001(b)		
Ξlg	in, IL 60123 from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	ck: Pentair 17 Shares	\$332.50		\$0.00	735 ILCS 5/12-1001(b)		
LIIIC	Holl Genedale A.E. 1911			100% of fair market value, up to any applicable statutory limit			
	leral: Est. 2015 Tax Refund	\$1,300.00		\$455.00	735 ILCS 5/12-1001(b)		
LIIIC	Hom Schedule A.D. 25.1			100% of fair market value, up to any applicable statutory limit			
	te: Est 2015 Tax Refund	\$100.00		\$0.00	735 ILCS 5/12-1001(b)		
LIIIC	Hom ochedale PVB. 2012			100% of fair market value, up to any applicable statutory limit			

Yes

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Kathryn Alyssa D	avis		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is ar
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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			3.3		
Fill in this inf	formation to identify your	case:			
Debtor 1	Kathryn Alyssa Da	avie			
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTR	RICT OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Fo	orm 106E/F				
	E/F: Creditors W	ho Havo Une	ocured Claims		12/15
					RIORITY claims. List the other party to
D: Creditors Wh the Continuation number (if know	o Have Claims Secured by Pro n Page to this page. If you have	pperty. If more space is e no information to rep	needed, copy the Part ye	ou need, fill it out, number the	cured claims that are listed in Schedule entries in the boxes on the left. Attach tional pages, write your name and case
1. Do any cre	ditors have priority unsecured	claims against you?			
■ No. Go	to Part 2.				
☐ Yes.					
	t All of Your NONPRIORIT	Y Unsecured Claims	s		
3. Do any cre	ditors have nonpriority unsecu	ıred claims against you	?		
☐ No. You	have nothing to report in this pa	rt. Submit this form to th	e court with your other sch	edules.	
Yes.					
claim, list th	ne creditor separately for each cla	aim. For each claim liste	d, identify what type of clain	m it is. Do not list claims already	has more than one nonpriority unsecured included in Part 1. If more than one the Continuation Page of Part 2.
or cancer rion	ao a particular cianti, not tito cuito	. oroanoro r art o yo		nphony andoodiod oldinio iii odi	Total claim
4.1 Capi	tal One	Last 4 o	ligits of account number	1099	\$11,972.00
Nonpri	ority Creditor's Name				
	Box 6462	When v	as the debt incurred?	2003	
	I Stream, IL 60197 er Street City State Zlp Code	Δs of th	e date you file, the claim	is: Check all that apply	
	ncurred the debt? Check one.		•	13. Oncor all that apply	
■ De	btor 1 only	☐ Con			
	btor 2 only	∐ Unlie	quidated		
	btor 1 and Debtor 2 only	☐ Disp			
	•		NONPRIORITY unsecure	ed claim:	
	least one of the debtors and ano	3100	ent loans		
	eck if this claim is for a comm claim subject to offset?	J Obii	gations arising out of a sep s priority claims	paration agreement or divorce that	t you did not
Is the	-		' '	ing plans, and other similar debts	
☐ Yes	S	■ Othe	er. Specify Credit car	u purcnases	

Best Case Bankruptcy

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Debto	r 1 Kathryn Alyssa Davis		Case number (if know)	
4.2	Lending Club	Last 4 digits of account number	3546	\$3,844.55
	Nonpriority Creditor's Name 71 Stevenson St Ste 300 San Francisco, CA 94105	When was the debt incurred?	11/2014	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	_		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepreport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Personal I	oan	
4.3	US Bank	Last 4 digits of account number	1950	\$9,071.00
	Nonpriority Creditor's Name PO Box 790408	When was the debt incurred?	2013	
	St. Louis, MO 63179 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	\square Check if this claim is for a community debt	Obligations arising out of a sep	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit care	d purchases	
4.4	US Bank	Last 4 digits of account number	4024	\$425.00
	Nonpriority Creditor's Name PO Box 5227 Cincinnati, OH 45201	When was the debt incurred?	8/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	_	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	_	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	□ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Overdraft	Protection	
trying more any c	his page only if you have others to be notified about the collect from you for a debt you owe to someor than one creditor for any of the debts that you list debts in Parts 1 or 2, do not fill out or submit this p	ut your bankruptcy, for a debt that your bankruptcy, for a debt that you else, list the original creditor in Pated in Parts 1 or 2, list the additional age.	arts 1 or 2, then list the collection agency here. creditors here. If you do not have additional pe	Similarly, if you have
		n which entry in Part 1 or Part 2 did you ne 4.2 of (<i>Check one):</i>	\square list the original creditor? \square Part 1: Creditors with Priority Unsecured Claims	
РО В	ox 923747		Part 2: Creditors with Nonpriority Unsecured Cla	
Norc	ross, GA 30010 La	ast 4 digits of account number	6648	
		~		

Official Form 106 E/F

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Debtor 1	Kathryn Alyssa Davis	Case number (if know)	
		-	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total c	aim
	6a.	Domestic support obligations	6a.	\$	0.00
Fotal claims from Part 1	6b.	Tayon and cortain other debte you awa the government	6b.	•	0.00
IIOIII Part I		Taxes and certain other debts you owe the government		\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	0.00
otal claims				·	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	25,312.55
	6j.	Total. Add lines 6f through 6i.	6j.	\$	25,312.55

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Fill in this information to identify your case:						
Debtor 1	Kathryn Alyssa D	Cathryn Alyssa Davis				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Patti O'Donoghue PO Box 656 Byron, IL 61010	Debtor is lessee of one year written lease for townhome located at 284 Nicole Dr #F, South Elgin, IL 60177

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Fill in th	is information to identify your	case:			
Debtor 1	Kathryn Alyssa D	Davis Middle Name	Last Name		
Debtor 2					
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nur	nber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Cod	obtore			40/45
Sche	aule H: Your Coa	eptors			12/15
people ar fill it out, your nam 1. Do No Ye 2. W Arizo No	re filing together, both are equand number the entries in the eand case number (if known to you have any codebtors? (If the estimate is seen that the last 8 years, have you have any codebtors? (If the estimate is seen that the last 8 years, have you have, California, Idaho, Louisiana estimate is Did your spouse, former spo	ually responsible for supple boxes on the left. Attack Answer every question you are filing a joint case, u lived in a community pr Nevada, New Mexico, Pu uuse, or legal equivalent live	olying correct information the Additional Page to Page 1997 the Additional Page 199	en. If more space is this page. On the to s a codebtor. Proceed (Community property of the control of the cont	.ý
in lir Forn	ne 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make su	ure you have listed	ng with you. List the person show the creditor on Schedule D (Officia), Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	Matt Davis 284 Nicole Dr #F South Elgin, IL 60177			☐ Schedule D,☐ Schedule E/F☐ Schedule G☐ Patti O'Donogh	line F, line 2.1

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Fill	in this information to i	identify your ca	ase:				1				
		Kathryn Alys									
	otor 2 use, if filing)										
Uni	ted States Bankruptcy	y Court for the	NORTHERN DISTRIC	T OF ILLINOIS							
(If kn	se number						□ A		d filing ent showing	postpetition	
	fficial Form 1 chedule I: Y						N	MM / DD/ Y	YYY		
sup	plying correct infornuse. If you are separ ch a separate sheet	nation. If you ated and you	ible. If two married peo are married and not fili r spouse is not filing wi On the top of any additi	ng jointly, and you th you, do not inc	ır spouse lude info	is li rmat	ving with ion abou	n you, incl It your spo	ude inforn ouse. If mo	nation abou ore space is	t your needed,
1.	Fill in your employ information.	ment		Debtor 1				Debtor 2	or non-fili	ing spouse	
	If you have more that	an one job,	Empleyment status	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional		Employment status	☐ Not employed	I			☐ Not er	mployed		
	employers.		Occupation	Tenant Servic	e Coord	inato	or				
	Include part-time, se self-employed work		Employer's name	Lincoln Prope	rty						
	Occupation may incor homemaker, if it		Employer's address	2800 W Higgir Suite 530 Hoffman Esta		0169					
			How long employed th	nere? <u>0 Yea</u>	rs, 1 Mo	nths	i	_			
Par	t 2: Give Detai	ls About Mon	thly Income								
	mate monthly incomuse unless you are se		ate you file this form. If	you have nothing to	o report fo	r any	line, writ	e \$0 in the	space. Inc	clude your no	on-filing
	u or your non-filing sp e space, attach a sep		ore than one employer, co	ombine the informa	tion for all	emp	loyers for	r that perso	on on the lir	nes below. If	you need
							For Del	btor 1	For Deb	tor 2 or ng spouse	
2.			ry, and commissions (becalculate what the month		2.	\$	2	,639.90	\$	N/A	
3.	Estimate and list n	nonthly overti	me pay.		3.	+\$		0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

N/A

2,639.90

Deb	otor 1	1 Kathryn Alyssa Davis Case nun									
					For	Debtor 1			Debtor i-filing s		
	Cop	y line 4 here	4.		\$	2,639	9.90	\$	-Illing 3	N/A	_
5.	List	all payroll deductions:									
0.	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	623	3.46	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$_		0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$		0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$_		0.00	\$_		N/A	_
	5e.	Insurance	5e		\$_		0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f		<u> </u>		0.00	\$_		N/A	_
	5g.	Union dues	50	٦.	\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:		1.+	\$		0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	623	3.46	\$		N/A	=
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,016	6.44	\$		N/A	_
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance	80 80 86).). d.	\$ \$ \$	(0.00 0.00 0.00 0.00 0.00	\$ \$ \$		N/A N/A N/A N/A	<u>-</u>
	90	that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f		\$ \$		0.00	\$_ \$		N/A N/A	_
	8g. 8h.	Other monthly income. Specify:	8g 8h). 1.+			0.00			N/A	_
			_	г				Ė			<u>-</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.00	\$_		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,016.44	+ \$		N/A	= \$	2,016.44
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		2,010.44			11//		2,010.44
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, you are friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	r dep			•		•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The relethat amount on the Summary of Schedules and Statistical Summary of Certalies							e. 12.	\$	2,016.44
13.	Do :	you expect an increase or decrease within the year after you file this form No.	1?								ly income
	_	Yes. Explain:									

Fill	in this information to identify your case:			
Deb	Kathryn Alyssa Davis		Check if this is:	
Deh	otor 2		An amended filingA supplement show	ving postpetition chapter
	ouse, if filing)		13 expenses as of	
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		MM / DD / YYYY	
000				
1	nown)			
0	fficial Form 106J			
	chedule J: Your Expenses			12/15
Be	as complete and accurate as possible. If two married people are filing primation. If more space is needed, attach another sheet to this form. (make the complete in the comple	g together, both are On the top of any ad	equally responsible folditional pages, write	or supplying correct your name and case
Par 1.	t 1: Describe Your Household Is this a joint case?			
١.	No. Go to line 2.			
	☐ Yes. Does Debtor 2 live in a separate household?			
	□ No			
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Se	eparate Household of	Debtor 2.	
2.	Do you have dependents? ■ No			
		endent's relationship to tor 1 or Debtor 2	Dependent's age	Does dependent live with you?
	Do not state the			□ No
	dependents names.			☐ Yes ☐ No
				☐ Yes
				□ No
				☐ Yes
				□ No
				☐ Yes
3.	Do your expenses include No			
	expenses of people other than yourself and your dependents?			
Do	<u>·</u>			
	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are	using this form as	a supplement in a Cha	apter 13 case to report
exp	penses as of a date after the bankruptcy is filed. If this is a supplement plicable date.	ntal <i>Schedule J</i> , ched	ck the box at the top o	of the form and fill in the
	lude expenses paid for with non-cash government assistance if you k			
	value of such assistance and have included it on Schedule I: Your Inficial Form 106I.)	ncome	Your expe	enses
(
4.	The rental or home ownership expenses for your residence. Include payments and any rent for the ground or lot.	first mortgage	l. \$	775.00
	If not included in line 4:			
	4a. Real estate taxes	4a	ı. \$	0.00
	4b. Property, homeowner's, or renter's insurance		a. \$ o. \$	0.00 0.00
	4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses	4b	o. \$	
5.	4b. Property, homeowner's, or renter's insurance	4է 4c 4c	o. \$	0.00

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Deb	tor 1 Kathryn Alyssa Davis	Case num	nber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	140.00
	6b. Water, sewer, garbage collection	6b.	\$	60.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	20.00
10.	Personal care products and services	10.	\$	20.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		·	
	Do not include car payments.	12.	\$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	12.00
	15b. Health insurance	15b.	\$	200.00
	15c. Vehicle insurance	15c.	\$	60.00
	15d. Other insurance. Specify:	15d.		0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		· —	
	Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.		0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as		¢	0.00
40	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	· .	
19.	Other payments you make to support others who do not live with you.	40	\$	0.00
00	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	· <u> </u>	0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
21.	Other: Specify:	21.	+\$	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	1,987.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,007.00
	, , , , , , , , , , , , , , , , , , , ,		·	4 227 22
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,987.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,016.44
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,987.00
				, , , , , , , , , , , , , , , , , , ,
	23c. Subtract your monthly expenses from your monthly income.			20.44
	The result is your monthly net income.	23c.	\$	29.44
24.	Do you expect an increase or decrease in your expenses within the year after your for example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage? No.			ase or decrease because of a
	☐ Yes. Explain here:			
	i			

	mation to identify your	case:		
Debtor 1	Kathryn Alyssa D			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing
Official For	m 106Dec			ů,
Declarat	tion About a	n Individual	Debtor's Schedules	12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is N	IOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have rethat they are true and correct. X /s/ Kathryn Alyssa Davis Kathryn Alyssa Davis Signature of Debtor 1	ead the summary and schedules filed with this declaration and X Signature of Debtor 2
Date January 29, 2016	Date

Fill	in this info	ormation to identify you	r case:			
Deb	otor 1	Kathryn Alyssa	Davis			
		First Name	Middle Name	Last Name		
1	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States I	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	e number					
(if kn	own)					Check if this is an amended filing
Of	ficial F	orm 107				
			Affairs for Individ	duals Filing for B	ankruptcy	12/1
					e equally responsible for su	polving correct
info	rmation. If	more space is needed	, attach a separate sheet to		ny additional pages, write yo	
num	ber (IT Kno	wn). Answer every que	stion.			
Par	Give	Details About Your Ma	arital Status and Where Yo	u Lived Before		
1.	What is yo	our current marital statu	ıs?			
	☐ Marrie	ed				
	■ Not m	narried				
2.	During the	e last 3 vears, have you	lived anywhere other than	where you live now?		
	_	race o yours, navo you	invou uniyimioro ouror ululi	micro you mo nom .		
	■ No					
	⊔ Yes.	List all of the places you	lived in the last 3 years. Do r	not include where you live no	W.	
	Debtor 1	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	idress:	Dates Debtor 2 lived there
					nity property state or territo Rico, Texas, Washington and	
	■ No					
	☐ Yes.	Make sure you fill out Sc	hedule H: Your Codebtors (C	Official Form 106H).		
Par	t 2 Evn	lain the Sources of You	ur Incomo			
rai	СХР	ialli tile Sources or Tot	ii iiicoiiie			
	Fill in the t	otal amount of income yo	ou received from all jobs and	ng a business during this y all businesses, including par ve together, list it only once u		endar years?
	□ No					
	Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		1 of current year until iled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$2,243.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Deb	otor 1 📙	Kathryn Alyss	sa Davis				Ca	ase n	umber (if known)		
				Debtor 1					Debtor 2		
				Sources	of income that apply.		s income e deductions and sions)	5	Sources of income Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2015)			■ Wage bonuses,	s, commissions, tips		\$32,664.00		☐ Wages, com conuses, tips	missions,		
				☐ Opera	ting a business			[☐ Operating a I	business	
		ndar year befo o December 3		■ Wage bonuses,	s, commissions, tips		\$30,544.00		☐ Wages, com ponuses, tips	missions,	
				☐ Opera	ting a business			[☐ Operating a I	business	
	gambling List each	g and lottery wi	nnings. If yo	ou are filing	ents; pensions; re a joint case and y ach source separ	you have i	ncome that you r	receive	ed together, list	it only once	uits; royalties; and under Debtor 1.
				Debtor 1					Debtor 2		
					of income below		s income e deductions and sions)	5	Sources of income Describe below.		Gross income (before deductions and exclusions)
		endar year: o December 3	1, 2015)	Pentair I	Dividends		\$21.76	6			
		ndar year befo o December 3		Pentair I	Dividends		\$10.20	0			
					ore You Filed for	-					
6.	□ No.	Neither Del	otor 1 nor D	Debtor 2 ha	rimarily consuments Is primarily consuments Is primarily consuments Is primarily, or househouse	sumer del	ots. Consumer de	lebts a	re defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the 9	00 days befo	•	l for bankruptcy, o	did you pa	y any creditor a to	total of	\$6,225* or mo	re?	
			paid that cr not include	editor. Do r payments t		ents for do this bankı	mestic support of uptcy case.	bligati	ons, such as ch	nild support a	he total amount you and alimony. Also, do
	■ Yes				re primarily cons I for bankruptcy, o			total of	f \$600 or more?)	
		■ No.	Go to line 7	7 .							
			include pay	ments for c	or to whom you pa domestic support nkruptcy case.						t creditor. Do not include payments to
	Credito	r's Name and	Address		Dates of payme	ent	Total amount		Amount you	Was this p	ayment for
							paid		still owe		

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De	btor 1 Kathryn Alyssa Davis		Cas	se number (<i>if known</i>)		
7.	Within 1 year before you filed for bankrupe Insiders include your relatives; any general proporations of which you are an officer, directincluding one for a business you operate as a support and alimony.	artners; relatives of any ge- ctor, person in control, or o	neral partners; partners wher of 20% or more	erships of which your of their voting sec	u are a genera urities; and an	al partner; y managing agent,
	■ No □ Yes. List all payments to an insider					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
		. ,	paid	still owe		
3.	Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or co		yments or transfer a	any property on a	ccount of a de	ebt that benefited an
	No					
	Yes. List all payments to an insider	Datas of normant	Total amount	A	December for t	ulaia waxaana
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include credi	this payment tor's name
Pai	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
ð.	Within 1 year before you filed for bankrup: List all such matters, including personal injury modifications, and contract disputes. ■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrup Check all that apply and fill in the details below No		erty repossessed, f	oreclosed, garnis	hed, attached	l, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property Explain what happene	d	Date		Value of the property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		cluding a bank or fi	nancial institution	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date :	action was	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	■ No □ Yes					
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankru	otcy, did you give any gif	ts with a total value	of more than \$60	0 per person	?
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

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Deb	otor 1	Kathryn Alyssa Davis		Cas	se number (if known)	
14.		n 2 years before you filed for bank No Yes. Fill in the details for each gift or		did you give any gifts or contributions	with a tota	l value of more than	n \$600 to any charity
	Gifts more Char	or contributions to charities that than \$600 ity's Name less (Number, Street, City, State and ZIP Coo	total	Describe what you contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses					
	disast	n 1 year before you filed for bankriter, or gambling? No Yes. Fill in the details.	uptcy or	since you filed for bankruptcy, did you	u lose anytl	hing because of the	eft, fire, other
	Desc	cribe the property you lost and the loss occurred	Include	be any insurance coverage for the loss of the amount that insurance has paid. List g insurance claims on line 33 of Schedukty.	t	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfer	s				
	Includ	ulted about seeking bankruptcy or le any attorneys, bankruptcy petition No Yes. Fill in the details. on Who Was Paid	prepari	id you or anyone else acting on your being a bankruptcy petition? s, or credit counseling agencies for service Description and value of any propert transferred	ces required		erty to anyone you Amount of payment
	Emai	ess il or website address on Who Made the Payment, if Not	You	u ansterreu		made	payment
	1733 Enci	cus Credit Counseling 37 Ventura Boulevard ino, CA 91316 ://www.abacuscc.org/				11/9/15	\$25.00
	22 S Gene	i Murphy & Associates outh 4th Street Suite 2 eva, IL 60134 tti@pettimurphylaw.com		Attorney Fees and filing fee		1/15/16	\$835.00
	promi		ditors o	id you or anyone else acting on your bor to make payments to your creditors? ted on line 16.		r transfer any propo	erty to anyone who
	_	No ∕es. Fill in the details.					
	Perso Addr	on Who Was Paid ess		Description and value of any propert transferred	ty	Date payment or transfer was made	Amount of payment

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Deb	tor 1 K	athryn Alyssa Davis		C	ase num	ber (if known)	
18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). include gifts and transfers that you have already listed on this statement.							
	■ No						
		s. Fill in the details.			_		
	Addres	Who Received Transfer s	Description and v		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person	's relationship to you					
 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of white beneficiary? (These are often called asset-protection devices.) No 						e of which you are a	
		s. Fill in the details.	Description and	value of the manual		.f.,	Data Transfer was
	Name o	or trust	Description and V	alue of the prope	erty trans	sterrea	Date Transfer was made
Pari	: 8: Li:	st of Certain Financial Accounts, Inst	ruments. Safe Deposi	t Boxes, and Stor	age Uni	ts	
· Gi		ot of certain i manoial Accounts, mou	umento, care peposi	t Boxes, and Otor	age on		
	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.						
			ast 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	US Ba	nk)	(XXX-2533	☐ Checking		11/3/2015	\$5.02
	PO Bo			■ Savings			
	St. Pat	ıl, MN 55101		☐ Money Marke	t		
				☐ Brokerage			
				Other			
 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secucash, or other valuables? ■ No □ Yes. Fill in the details. 						sitory for securities,	
		of Financial Institution S (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		escribe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy						
	■ No						
	☐ Yes	s. Fill in the details.					
		of Storage Facility S (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		escribe	the contents	Do you still have it?

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Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these substances.	ir, land, soil, surface water, groun	- ·					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environmental material, pollutant, contaminant, or s	mental law defines as a hazardous	s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e under or in violation of an environn	nental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	Part 11: Give Details About Your Business or Connections to Any Business							
27.	lithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?							
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing execut	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Debtor 1 Kathryn Alyssa Davis

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tor 1 Kathryn Alyssa Davis	Case number (if known)					
■ No. None of the above applies. Go to	Part 12.					
Yes. Check all that apply above and fill in the details below for each business.						
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number				
	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.				
		Dates business existed				
	otcy, did you give a financial statement to	anyone about your business? Include all financial				
■ No						
Yes. Fill in the details below.						
Name Address	Date Issued					
(Number, Street, City, State and ZIP Code)						
12: Sign Below						
rue and correct. I understand that making a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.	a false statement, concealing property, or	obtaining money or property by fraud in connection				
	Signature of Debtor 2					
, , , , , , , , , , , , , , , , , , , ,	3					
January 29, 2016	Date					
0	nent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?				
ou pay or agree to pay someone who is n	ot an attorney to help you fill out bankrupt	tcy forms?				
i vii i tree	Yes. Check all that apply above and figures Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) t 12: Sign Below Ye read the answers on this Statement of Figure and correct. I understand that making a bankruptcy case can result in fines up to S.S.C. §§ 152, 1341, 1519, and 3571. Kathryn Alyssa Davis thryn Alyssa Davis nature of Debtor 1 e January 29, 2016	No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankruptcy, did you give a financial statement to institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Date Issued Tere and the answers on this Statement of Financial Affairs and any attachments, and the analyses can result in fines up to \$250,000, or imprisonment for up to 20 y I.S.C. §§ 152, 1341, 1519, and 3571. Kathryn Alyssa Davis Intryn Alysa Davis Intyy Alysa				

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Fill in this information to identify your case:						
Debtor 1						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS			
Case number (if known)				☐ Check if this is a amended filing		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Debtor	1 Kathryn A	Alyssa Davis	Case numb	Der (if known)
name: Description of property securing debt:			 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
in the ii You ma	vunexpired per information bel in assume an u	ow. Do not list real estate lea inexpired personal property l	u listed in Schedule G: Executory Contracts and ses. Unexpired leases are leases that are still in ease if the trustee does not assume it. 11 U.S.C	n effect; the lease period has not yet ended. . § 365(p)(2).
Descri	be your unexp	ired personal property leases	S	Will the lease be assumed?
Lessor	's name:	Patti O'Donoghue		□ No
Descrip Proper	otion of leased ty:	Debtor is lessee of one y Nicole Dr #F, South Elgi	year written lease for townhome located a n, IL 60177	■ Yes
Part 3:	Sign Below			
propert	y that is subject	ct to an unexpired lease.	ated my intention about any property of my est	ate that secures a debt and any personal
	/ Kathryn Aly		X	
	Kathryn Alyssa Davis Signature of Debtor 2			
Si	ignature of Debi	tor 1		
D	ate Janua	ry 29, 2016	Date	

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Kathryn Alyssa Davis		Case No	·				
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COMPI	ENSATION OF ATTOR	NEY FOR I	DEBTOR(S)				
co	ompensation paid to me within one year before the fil	o 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ion paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to I on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	500.00	<u>)</u>			
	Prior to the filing of this statement I have received	d	\$	500.00	<u>)</u>			
	Balance Due			0.00	<u>)</u>			
2. T	he source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3. T	he source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4 . ■	I have not agreed to share the above-disclosed con	npensation with any other person u	nless they are me	embers and assoc	iates of my law firm.			
	I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				of my law firm. A			
5. Iı	n return for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptc	y case, including	:			
b. c.	Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of credit [Other provisions as needed]	atement of affairs and plan which	may be required;	-	in bankruptcy;			
6. B	y agreement with the debtor(s), the above-disclosed for the lifering representation in an adversary process, \$1,000 must be paid, and charges related and \$100/hour for his paralegal. If not	eeding or other contested bar ted to said services will be bi	nkruptcy matte lled at the rate	of \$250/hour f				
		CERTIFICATION						
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.								
Ja	nuary 29, 2016	/s/ Edgar P. Petti						
Da	-	Edgar P. Petti 219						
		Signature of Attorney Petti Murphy & As						
		22 South 4th Stree						
		Geneva, IL 60134						
		630-232-9303 Fax		5				
		<u>epetti@pettimurph</u> Name of law firm	ıyıaw.com					

Capital One PO Box 6462 Carol Stream, IL 60197

Lending Club
71 Stevenson St Ste 300
San Francisco, CA 94105

US Bank PO Box 790408 St. Louis, MO 63179

US Bank PO Box 5227 Cincinnati, OH 45201

Vital Recovery PO Box 923747 Norcross, GA 30010